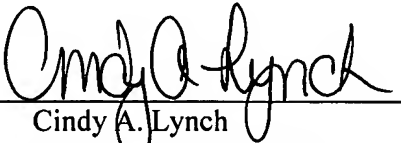


REMARKS

Claims 1-12 were pending in the present application. Claims 13-20 were added. Accordingly, claims 1-20 are currently under consideration. The Commissioner is authorized to charge any fees that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-3100. It is requested that the Examiner contact the undersigned with any questions regarding this matter.

Respectfully submitted,

CONOR MEDSYSTEMS, INC.

By: 
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Date: June 21, 2004